

TRANSACTION # _____ GROUP # _____



City Of Raleigh
North Carolina

NEWSRACKS/ MAIL-BOX APPLICATION

BUSINESS, CORPORATION, L.L.C.: _____

ADDRESS: _____

TELEPHONE # _____ FAX # _____

LOCATION ADDRESS: _____

CONTACT PERSON: _____

TELEPHONE # _____ CELL # _____

FOR NEWSRACK REQUESTS, HOW OFTEN DO YOU PUBLISH?

LOCATION DETAILS: _____

CHECK LIST

CITY OF RALEIGH BUSINESS LICENSE _____ VALID INSURANCE POLICY _____

INDEMNITY AGREEMENT _____ LOCATION DETAILS _____

PERMIT FEES _____ OTHERS, IF NEEDED _____